

PTO/SB/24 (06-04)

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Application Number	10/004,924
Filing Date	DECEMBER 5, 2001
First Named Inventor	JAMES M. MCARDLE
Art Unit	2194
Examiner Name	ANYA, CHARLES E.
Attorney Docket Number	AUS920010930US1

Please check only one of boxes 1 or 2 below:

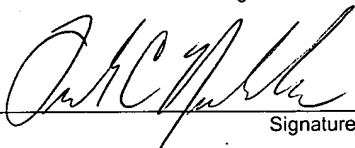
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Signature

OCTOBER 27, 2005

Date

FRANK C. NICHOLAS

Typed or printed name

(847) 905-7111

Telephone Number


Note: Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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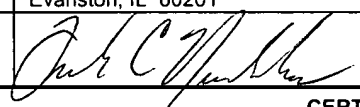
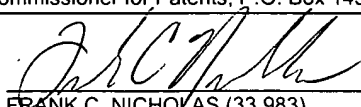
IFW 2194

TRANSMITTAL FORM 	Attorney Docket No.	AUS920010930US1 (9000/85)
	Application Number	10/004,924
	Filing Date	DECEMBER 5, 2001
	First Named Inventor	JAMES M. MCARDLE
	Group Art Unit	2194
Examiner		ANYA, CHARLES E.

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Status Letter <input type="checkbox"/> Petition for Extension of Time Request (dup) <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Supplemental Information Disclosure Statement, PTO-1449, art <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> Assignment Papers <input type="checkbox"/> Drawings: <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> To Convert a Provisional Application <input type="checkbox"/> Applicant Initiated Interview Request Form <input type="checkbox"/> Terminal Disclaimer <input checked="" type="checkbox"/> Express Abandonment Under 37 CFR 1.138 <input type="checkbox"/> Request of Refund	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input checked="" type="checkbox"/> Post Card Receipt <input type="checkbox"/> Additional Enclosure(s) (please identify below): <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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CALCULATION OF FEE

				Small Entity		Large Entity		
	Claims After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	Rate	Add'l Fee
Total		Minus		0	x \$25=	0	x \$50=	
Indep.		Minus		0	x \$100=	0	x \$200=	
First Presentation of Multiple Dep. Claim					+\$180=	---	+\$360=	
					total add'l fee	\$ 0	total add'l fee	\$ 0

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	FRANK C. NICHOLAS Registration No. 33,983 CARDINAL LAW GROUP 1603 Orrington Avenue, Suite 2000 Evanston, IL 60201		
Signature		Date	October 27, 2005
CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22202-1450 on this date: <u>October 27, 2005</u>			
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FRANK C. NICHOLAS (33,983)			